

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

10/657011

FILING DATE

APPLICANT(S)

1/13/05 1/15/05 CLAIMS

AS FILED	ADDITIONAL AMENDMENT		ADDITIONAL AMENDMENT		AS FILED	DEP
	IND	DEP	IND	DEP		
1						
2						
3						
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43						
44	1					
45		1				
46		1				
47		1				
48		1				
49		1	1	1		
50		1	1	1		

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS

1/18/05 F 1/15/05

IND	DEP	IND	DEP	IND	DEP
51	1				
52	1				
53					
54		1			
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99					
100					

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS

1

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5

14
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